

REC'D MAY 07 2024

IN THE UNITED STATES DISTRICT COURT  
FOR THE WESTERN DISTRICT OF MISSOURI  
WESTERN DIVISION

(Write the District and Division, if any, of the  
court in which the complaint is filed.)

Jeremy Hargal

(Write the full name of each plaintiff who is filing  
this complaint. If the names of all the plaintiffs  
cannot fit in the space above, please write "see  
attached" in the space and attach an additional  
page with the full list of names.)

-against-

Greene County Jail  
Dr. McGreevy

(Write the full name of each defendant who is  
being sued. If the names of all the defendants  
cannot fit in the space above, please write "see  
attached" in the space and attach an additional  
page with the full list of names. Do not include  
addresses here.)

**Complaint for Violation of Civil  
Rights**

(Prisoner Complaint)

Case No. \_\_\_\_\_  
(to be filled in by the Clerk's Office)

**REQUEST FOR TRIAL BY JURY**

Plaintiff requests trial by jury. ☒ Yes ☐ No

## I. The Parties to This Complaint

### A. The Plaintiff(s)

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Name Jeremy Haral

All other names by which you have been known:

ID Number 2970217

Current Institution Greene County Jail

Address 5100 W Division St.  
Springfield, MA 01106

### B. The Defendant(s)

- Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation.
- Make sure that the defendant(s) listed below are identical to those contained in the above caption.
- For an individual defendant, include the person's job or title (if known) and check whether you are bringing this complaint against them in their individual capacity or official capacity, or both.
- Attach additional pages if needed.

Defendant No. 1

Name Greene County Jail

Job or Title  
(if known) Mental Health

Shield Number Mental Health

Employer Greene County Jail

Address 5100 W Division St.



Individual capacity



Official capacity

Defendant No. 2

Name Dr. McGreevy  
Job or Title Mental health doctor  
(if known)  
Shield Number \_\_\_\_\_  
Employer Green County Jail  
Address 5100 W Division St  
Springfield MO 65806  
☒ Individual capacity ☒ Official capacity

## II. Basis for Jurisdiction

Under 42 U.S.C. § 1983, you may sue state or local officials for the “deprivation of any rights, privileges, or immunities secured by the Constitution and [federal laws].” Under *Bivens v. Six Unknown Named Agents of Federal Bureau of Narcotics*, 403 U.S. 388 (1971), you may sue federal officials for the violation of certain constitutional rights.

A. Are you bringing suit against (check all that apply):

- ☐ Federal officials (a *Bivens* claim)  
☒ State or local officials (a § 1983 claim)

B. Section 1983 allows claims alleging the “deprivation of any rights, privileges, or immunities secured by the Constitution and [federal laws].” 42 U.S.C. § 1983. Plaintiffs suing under *Bivens* may only recover for the violation of certain constitutional rights.

What federal constitutional or statutory right(s) do you claim is/are being violated by state or local officials?

They are refusing my right for mental health  
and medical attention, and my right for  
the grievance process

### III. Prisoner Status

Indicate whether you are a prisoner or other confined person as follows (*check all that apply*):

- ☒ Pretrial detainee
- ☐ Civilly committed detainee
- ☐ Immigration detainee
- ☐ Convicted and sentenced state prisoner
- ☐ Convicted and sentenced federal prisoner
- ☐ Other (*explain*) \_\_\_\_\_

### IV. Statement of Claim

Write a short and plain statement of FACTS that support your claim. Do not make legal arguments. You must include the following information:

- What happened to you?
- What injuries did you suffer?
- Who was involved in what happened to you?
- How were the defendants involved in what happened to you?
- Where did the events you have described take place?
- When did the events you have described take place?

If more than one claim is asserted, number each claim and write a short and plain statement of each claim in a separate paragraph. Attach additional pages if needed.

I got charged with a higher felony than I was  
being held on. I suffered mental trauma and abuse.  
The mental health team was involved along with  
the rest of the county jail officials. They refused to  
talk to me about my mental health needs. This took  
place in the Greene County Jail. 3/16/2024 is when it  
happened.

## V. Injuries

If you sustained injuries related to the events alleged above, describe your injuries and state what medical treatment, if any, you required and did or did not receive.

The incident I got charged with resulted in minor lacerations in multiple spots, light headedness, and dizziness, medical was trying to assess me, but officers said I was good and didn't allow them to fully assess me.

## VI. Relief

State briefly what you want the court to do for you. Make no legal arguments. Do not cite any cases or statutes. If requesting money damages, include the amounts of any actual damages and/or punitive damages claimed for the acts alleged. Explain the basis for these claims.

I would like the charges to be dismissed, and \$50 a day for every day spent on the charge for the mental trauma I have experienced from the experience.

## VII. Exhaustion of Administrative Remedies Administrative Procedures

The Prison Litigation Reform Act ("PLRA"), 42 U.S.C. § 1997e(a), requires that "[n]o action shall be brought with respect to prison conditions under section 1983 of this title, or any other Federal law, by a prisoner confined in any jail, prison, or other correctional facility until such administrative remedies as are available are exhausted."

Administrative remedies are also known as grievance procedures. Your case may be dismissed if you have not exhausted your administrative remedies.

- A. Did your claim(s) arise while you were confined in a jail, prison, or other correctional facility?

☒  
☐

Yes  
No

If yes, name the jail, prison, or other correctional facility where you were confined at the time of the events giving rise to your claim(s).

Greene County Jail Springfield Mo  
\_\_\_\_\_  
\_\_\_\_\_

- B. Does the jail, prison, or other correctional facility where your claim(s) arose have a grievance procedure?

☒  
☐  
☐

Yes  
No  
Do not know

- C. Does the grievance procedure at the jail, prison, or other correctional facility where your claim(s) arose cover some or all of your claims?

☐  
☒  
☐

Yes  
No  
Do not know

If yes, which claim(s)?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- D. Did you file a grievance in the jail, prison, or other correctional facility where your claim(s) arose concerning the facts relating to this complaint?

☐  
☒

Yes  
No

If no, did you file a grievance about the events described in this complaint at any other jail, prison, or other correctional facility?

☐  
☒

Yes

No

E. If you did file a grievance:

1. Where did you file the grievance?

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2. What did you claim in your grievance? *(Attach a copy of your grievance, if available)*

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3. What was the result, if any? *(Attach a copy of any written response to your grievance, if available)*

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4. What steps, if any, did you take to appeal that decision? Is the grievance process completed? If not, explain why not. *(Describe all efforts to appeal to the highest level of the grievance process.)*

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F. If you did not file a grievance:

1. If there are any reasons why you did not file a grievance, state them here:

I sent multiple requests for a grievance form and none were returned.

2. If you did not file a grievance but you did inform officials of your claim, state who you informed, when and how, and their response, if any:

I informed mental health when they came to see me in AD-SEG about my thoughts and feeling on it and nothing was done.

G. Please set forth any additional information that is relevant to the exhaustion of your administrative remedies.

The grievance system is on the tablets in the Greene County Jail you can't have a tablet in ad-seg other than for law library purposes.

*(Note: You may attach as exhibits to this complaint any documents related to the exhaustion of your administrative remedies.)*

### VIII. Previous Lawsuits

The "three strikes rule" bars a prisoner from bringing a civil action or an appeal in federal court without paying the filing fee if that prisoner has "on three or more prior occasions, while incarcerated or detained in any facility, brought an action or appeal in a court of the United States that was dismissed on the grounds that it is frivolous, malicious, or fails to state a claim upon which relief may be granted, unless the prisoner is under imminent danger of serious physical injury." 28 U.S.C. § 1915(g).

To the best of your knowledge, have you had a case dismissed based on this "three strikes rule"?

☐  
☒

Yes  
No



If so, state which court dismissed your case, when this occurred, and attach a copy of the order if possible.

- \_\_\_\_\_
- \_\_\_\_\_
- A. Have you filed other lawsuits in state or federal court dealing with the same facts involved in this action?

☐ Yes  
☒ No

- B. If your answer to A is yes, describe each lawsuit by answering questions 1 through 7 below. *(If there is more than one lawsuit, describe the additional lawsuits on another page, using the same format.)*

1. Parties to the previous lawsuit

Plaintiff(s) \_\_\_\_\_

Defendant(s) \_\_\_\_\_

2. Court *(if federal court, name the district; if state court, name the county and State)*

\_\_\_\_\_

3. Docket or index number

\_\_\_\_\_

4. Name of Judge assigned to your case

\_\_\_\_\_

5. Approximate date of filing lawsuit

\_\_\_\_\_

6. Is the case still pending?

☐ Yes  
☐ No

If no, give the approximate date of disposition. \_\_\_\_\_

7. What was the result of the case? *(For example: Was the case dismissed? Was judgment entered in your favor? Was the case appealed?)*

\_\_\_\_\_  
\_\_\_\_\_

- C. Have you filed other lawsuits in state or federal court otherwise relating to the conditions of your imprisonment?

☐ Yes  
☒ No

- D. If your answer to C is yes, describe each lawsuit by answering questions 1 through 7 below. *(If there is more than one lawsuit, describe the additional lawsuits on another page, using the same format.)*

1. Parties to the previous lawsuit

Plaintiff(s) \_\_\_\_\_  
Defendant(s) \_\_\_\_\_

2. Court *(if federal court, name the district; if state court, name the county and State)*

\_\_\_\_\_

3. Docket or index number

\_\_\_\_\_

4. Name of Judge assigned to your case

\_\_\_\_\_

5. Approximate date of filing lawsuit

\_\_\_\_\_

6. Is the case still pending?

☐ Yes  
☐ No *(If no, give the approximate date of disposition):*

\_\_\_\_\_

7. What was the result of the case? (For example: Was the case dismissed? Was judgment entered in your favor? Was the case appealed?)
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## IX. Certification and Closing

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

I agree to provide the Clerk's Office with any changes to my address where case-related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Date of signing: May 3, 2024


Signature of Plaintiff

Printed Name of Plaintiff

Prison Identification #

Prison Address

City State Zip Code

  
\_\_\_\_\_  
Jeremy Haral  
\_\_\_\_\_  
2970217  
\_\_\_\_\_  
5100 W Division St  
\_\_\_\_\_  
Springfield, Mo 65812  
\_\_\_\_\_

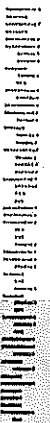
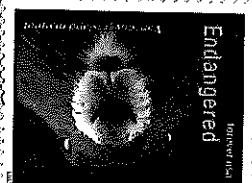
Greene County Jail  
Jeremy H. H. 2970217  
5100 W Division Street  
Springfield, MO 65806

Screened By  
U.S. Marshals

LEGAL

United States District Court  
Western District of Missouri  
1400 U.S. Courthouse  
222 John A. Hammond Pkwy  
Springfield, Mo 65802

REC'D MAY 07 2024



1045

UNITED STATES DISTRICT COURT  
WESTERN DISTRICT OF MISSOURI  
SPRINGFIELD, MISSOURI 65806  
OFFICIAL BUSINESS

Attn: Pius Pro Se

U.S. District Court  
Office of the Clerk  
1510 Whitaker Courthouse  
400 E. Ninth Street  
Kansas City, MO 64106

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